PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUL FEE
Commissioner for Patents
P.O. Box 1450

(571) 272 2005

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate, All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new commintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the		
	par hav	Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
23492	7590 04/05/	2007		Certifi	cate of Mailing or Trans	emission
ROBERT DEI			I h	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
ABBOTT LABORATORIES				addressed to the Mail Stop ISSUE FEE address above, or being facsimile		
100 ABBOTT PARK ROAD DEPT. 377/AP6A				transmitted to the USPTO (571) 273-2885, on the date indicated below.		
ABBOTT PARK, IL 60064-6008				JESSICA R. MOINTOV (Depositor's name)		
	1, 12 0000 1 0000			tes	uea Ri Ilas	(Signature)
				Ju	1 100	507 (Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	A.	TTORNEY DOCKET NO.	CONFIRMATION NO.
10/763,548 01/23/2004		Michael G. Lowery	7286.US.O1 7517		7517	
	: METHOD FOR DETEC					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	EE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	. NO	\$1400	\$300	\$0	\$1700	07/05/2007
EXAM	IINER	ART ŲNIT	CLASS-SUBCLASS]		
	ERIC FRANK	. 3768	600-592000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a 2						
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or ty	pc)		_
PLEASE NOTE: Uni	less an assignee is identif	ied below, no assignce	data will appear on the r	atent. If an assignee	is identified below, the d	ocument has been filed for
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Abbott Laboratories Abbott Park, IL						
Apport Laborationes Apport Park, IL						
Please check the appropr	iate assignce category or o	categories (will not be pr	rinted on the patent):	Individual 🖾 Corpo	oration or other private gro	oup entity Government
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
Issue Fee						
Publication Fee (No small entity discount permitted) Advance Order - # of Copies						
Advance Order -	of Copies		overpayment, to Depo	sit Account Number_	the required fee(s), any de	n extra copy of this form).
	tus (from status indicated s SMALL ENTITY status		☐ b. Applicant is no lon	ger claiming SMALL.	ENTITY status. See 37 CI	FR 1 27(a)(2)
NOTE: The Issue Fee an		red) will not be accente	d from anyone other than			ne assignee or other party in
Authorized Signature	Mara 9	JeBoe		Date U	ne 29,20	007
Typed or printed name	1112	DEBOE		Registration No.		
	.5 . 150.		on is required to obtain or 1.14. This collection is es depending upon the indiversity of the chief Information Office COMPLETED FORMS To spond to a collection of information of information of information of information or information.			by the USPTO to process) ag gathering, preparing, and ane you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,